

PART B - FEE(S) TRANSMITTAL

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15885 7590 01/14/2010

ELI LILLY & COMPANY
PATENT DIVISION
P.O. BOX 6288
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(Depositor's name)

(Signature)

10/04/2010

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/598,310	08/24/2006	Konstantinos Gavardinas	X-16125	2716

TITLE OF INVENTION: BICYCLIC SUBSTITUTED INDOLE DERIVATIVE STEROID HORMONE NUCLEAR RECEPTOR MODULATORS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE			
nonprovisional	NO	\$1510	\$300	\$0	\$1810	04/14/2010			
EXAMINER		ART UNIT	CLASS-SUBCLASS						
SEAMAN, D MARGARET M		1625	548-454000						
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).									
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			2. For printing on the patent front page, list						
<input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47, Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,						
			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)									

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for reclassification as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Eli Lilly and Company

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Indianapolis, Indiana

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4. The following fee(s) are submitted.

Payment of Fee(s). (Please first remail any previously paid issue fee shown above)

Issue Fee

A check is enclosed.

Publication Fee (No small entity discount permitted)

Payment by credit card. Form PTO-2038 is attached.

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5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Alexander Wilson

Date 12 APRIL 2010

Typed or printed name

ALEXANDER WILSON

Registration No. 45,782

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